

# TRANSMITTAL FORM

	Application Serial Number	10/050,994
	Filing Date	January 22, 2007
	First Named Inventor	Jim HUNTER, et al.
	Group Art Unit	2872
	Examiner Name	Alessandro V. Amari
	Attorney Docket No.	CYPR-0018-CP2
	Patent No.	Not applicable
	Issue Date	Not applicable

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal Drawing(s)</li> </ul>	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Correction (in duplicate)</li> </ul>
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official</li> <li><input type="checkbox"/> Draftsperson including Drawings</li> <li>[Total Sheets _____]</li> </ul>	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <ul style="list-style-type: none"> <li><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)</li> <li><input type="checkbox"/> Terminal Disclaimer</li> <li><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application</li> <li><input type="checkbox"/> Small Entity Statement</li> <li><input type="checkbox"/> CD(s) for large table or computer program</li> <li><input type="checkbox"/> Amendment After Allowance</li> </ul>	<input checked="" type="checkbox"/> Appeal Brief with \$510.00 fee <ul style="list-style-type: none"> <li><input type="checkbox"/> Status Inquiry</li> <li><input type="checkbox"/> Return Receipt Postcard</li> <li><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8</li> <li><input type="checkbox"/> Additional Enclosure(s) (please identify below)</li> </ul>
<input checked="" type="checkbox"/> Petition for Extension of Time (4 month) with \$1,640.00 fee		
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>		

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**SIGNATURE BLOCK**

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Respectfully submitted,  
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